Fill in this infor	nation to identify your cas	e:
Debtor 1	Terry M. Zernick	
Debtor 2 (Spouse, if filing)	Joshua P. Zernick	
United States E	Bankruptcy Court for the:	Western District of Pennsylvania
Case number (if known)	22-70242	-

Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

Check if this is an amended filing

## Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income** and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any

additional pages, write your name and case number (if known). Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filling on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 8 months, add the income for all 8 months and divide the total by 8. Fill in the result. Do not include any income amount more than once. For example, if both

			Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and commissi	ons (before all	\$	3,340.89	\$	4,377.42
. Alimony and maintenance payments. Do not include payment be so filled in.	payments from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly paid of you or your dependents, including child support. from an unmarried partner, members of your household, and roommates. Do not include payments from a spousity you listed on line 3.	Include regula , your depende	r contributions nts, parents,	\$	0.00	\$	0.00
Net income from operating a business, profession, or farm	Debtor 1					
Gross receipts (before all deductions)	\$ 0.00					
Ordinary and necessary operating expenses	-\$ 0.00	•				
Net monthly income from a business, profession, or farm	n \$ 0.00	Copy here ->	\$	0.00	\$	0.00
Net income from rental and other real property	Debtor 1					
Gross receipts (before all deductions)	\$ 0.00					
Ordinary and necessary operating expenses	-\$ 0.00					
Net monthly income from rental or other real property	\$ 0.00	Copy here ->	<b>\$</b>	0.00	\$	0.00

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Joshus P. Zernick    Column   Pable   Column   Pable   Column   Pable	Terry M. Zernick	•		Case numb	er (if known)	22-70242		
Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Secrity Act. Instead, list it here:  For you. Social Secrity Act. Instead, list it here:  For your spouse Social Secrity Act. Also social Se			_	<u></u>				
Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act, Instead, list it here.  For you \$ 0.00 Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence do not include any compensation, pension, pensy amount or allowance paled injury or United States Government in connection with a disability, or death of a member of the uniformed death and any only to the extent that it does not exceed the arrivation of the uniformed death and the source and amount.  Do not include any prediction of title 10 other than chapter 61 of that title.  10. Income from all other connection with which you would otherwise be entitled in the connection with exceeding any of a war crime, a crime against humanity or international or connection with a disability, combinate for the uniformed services. If necessary, list other sources and amount.  Do not include Government in connection with a disability, combinate related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.  10. Income from all other connection with a disability, combinate related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.  11. Calculate your total average monthly income. Add lines 2 through 10 for sources on the surface of the uniformed services. If necessary, list other sources on a separate page and put the total for Column A to the total for Column B.  12. Copy your total average monthly income from line 11.  13. Calculate the marital adjustment. Check one:  14. Your are married and your spouse is filling with you.  15. In the amount of the income lead in line 11. Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as pay				TABLE ASSESSMENT OF THE PARTY O	i de la como de la com	Debter 2 or non-filing s	pouse	
District Comparison	Interest dividends, and royalties			\$				
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For your spouse \$ 0.00  For your spouse \$ 0.00  Persion or retriement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, amountly, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retried pay paid under chapter \$1 \text{ of their 10, then include that pay only to the scent that it does not exceed the amount of retired pay to wink you would otherwise be entitled if relief under any provision of title 10 other than chapter \$1 \text{ of that 108}}  Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received as a viderin of a war crime, a crime against humanity or interned paid by the United States Government in comection with a devolves. If necessary, list other sources on a separate page and put the total below.  Total amounts from separate pages, if any.  1. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  2. Copy your total average monthly income from line 11.  3. Calculate the marital adjustment. Check one:  2. You are married and your spouse is filing with you. Fill in 0 below.  3. O.00  4. You are married and your spouse is not filing with you.  4. Fill in the amount of the income listed in line 11. Column B, that was NOT regularly paid for the household expenses of you or your dependents. Such as payment of the spouse's support of someone other than you or your dependents. Such as payment of the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. I				\$	0.00		0.00	
For you spouse \$ 0.00  Persion or retirement income. Do not include any amount received that was a banefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or United States Government in connection with a disability, combat-related injury or disability or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include mat pay only to the extent that it does not exceed the amount of refired pay to which you would witerwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act, payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.  1. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  1. Calculate your total average monthly income from line 11.  2. Determine How to Measure Your Deductions from income  1. Copy your total average monthly income from line 11.  3. Calculate the marital adjustment. Check one:  1. You are not married. Fill in 0 below.  1. You are married and your spouse is filling with you.  1. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents	Do not enter the amount if you contend	that the amount received was a						
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O. Income from all other sources not listed above. Specify the source and amount. Don not include any benefits received under the Social Security Act, payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, persion, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.  \$ 0.00 \$ 0.00  Total amounts from separate pages, if any.  11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  12. Determine How to Measure Your Deductions from Income  13. Calculate the marital adjustment. Check one:    You are not married. Fill in 0 below.	Pension or retirement income. Do not benefit under the Social Security Act. A not include any compensation, pension United States Government in connectic disability, or death of a member of the pay paid under chapter 61 of title 10, the state are seed the amount of retired.	of include any amount received also, except as stated in the new an pay, annuity, or allowance pay on with a disability, combat-rela uniformed services. If you receinen include that pay only to the new to which you would otherw	aid by the ated injury or ived any retired extent that it vise be entitled	l	0.00	)	0.00	
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Total\$	adjustments on a separate page		unt of income o	levoted to	each purp	ose. If necessar	y, list addi	tional
Total \$ 0.00 Copy here=>  14. Your current monthly income. Subtract line 13 from line 12. \$ 7,715			\$					
Total \$ 0.00 Copy here=>				<u></u>				
Total \$ 0.00 Copy here=>								
14. Your current monthly income. Subtract line 13 from line 12.  \$ 7,715								_
14. Your current monthly income. Subtract line 13 from line 12.  \$ 7,715	Total		\$		0.00	Copy here=>		0.0
15 Calculate your current monthly income for the year. Follow these steps:						]	\$	7,718.31
15a. Copy line 14 here=> \$ 7,71							\$	7,718.31

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Debtor 1 Debtor 2	Joshua P. Zernick	Case number (if known)	22-70242	
	Multiply line 15a by 12 (the number of months in a year).			<b>x</b> 12
1	15b. The result is your current monthly income for the year for this part of	the form		\$92,619.72
16. <b>C</b> a	alculate the median family income that applies to you. Follow these st	eps:		
16	Sa. Fill in the state in which you live.	-		
16	Sb. Fill in the number of people in your household.			
16	6c. Fill in the median family income for your state and size of household	e link specified in the separate tcy clerk's office.		\$74,805.00
	ow do the lines compare?			
17	7a. Line 15b is less than or equal to line 16c. On the top of page 1 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation	of this form, check box 1, <i>Dispos</i> on of Your Disposable Income (C	sable income i Official Form 12	s not determined under 22C-2).
17	7b. Line 15b is more than line 16c. On the top of page 1 of this form 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disyour current monthly income from line 14 above.	n, check box 2, <i>Disposable incor</i> posable Income (Official Form	ne is determin <b>122C-2)</b> . On l	ed under 11 U.S.C. § ine 39 of that form, copy
Part 3:	Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)			
18. Co	opy your total average monthly income from line 11 .	,,	\$	7,718.31
co sp	educt the marital adjustment if it applies. If you are married, your spous ontend that calculating the commitment period under 11 U.S.C. § 1325(b)( oouse's income, copy the amount from line 13. Pa. If the marital adjustment does not apply, fill in 0 on line 19a.	se is not filing with you, and you 4) allows you to deduct part of yo	о <b>и</b> г -\$ <sub>.</sub>	0.00
19	9b. Subtract line 19a from line 18.			\$
20. <b>C</b> a	alculate your current monthly income for the year. Follow these steps	: .		
20	Da. Copy line 19b			\$ 7,718.31
	Multiply by 12 (the number of months in a year).			<b>x</b> 12
20	Db. The result is your current monthly income for the year for this part of th	e form		\$92,619.72
20	Oc. Copy the median family income for your state and size of household from	om line 16c		\$74,805.00
21	i. How do the lines compare?			
	Line 20b is less than line 20c. Unless otherwise ordered by the coperiod is 3 years. Go to Part 4.	ourt, on the top of page 1 of this t	orm, check bo	x 3, The commitment
	■ Line 20b is more than or equal to line 20c. Unless otherwise orde commitment period is 5 years. Go to Part 4.	red by the court, on the top of pa	ge 1 of this fo	rm, check box 4, The
Part 4:				
Ву	y signing here, under penalty of perjury I declare that the information on the	is statement and in any attachm	ents/is true an	d correct.
7	Vs/ Terry M. Zernick Terry M. Zernick Signature of Debtor 1	/s/ Joshua P. Zernick Joshua P. Zernick Signature of Debtor 2	Shwal a	Jesnick-
	ate August 5, 2022 MM / DD / YYYY	Date August 5, 2022 MM / DD / YYYY		
lf	you checked 17a, do NOT fill out or file Form 122C-2.	•		

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Debtor 1 Debtor 2 Terry M. Zernick Joshua P. Zernick

Case number (if known)

22-70242

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.